Ø

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED FEC MAIL OPERATIONS CENTERS

2001 OCT 5/12. A of 23

1.	NAME OF COMMITTEE (in full)	TYPE OR PRINT		mple: If typing, the lines.	- · · · · · · · · · · · · · · · · · · ·	2FE4M5	. .
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	Check if different than previously reported. (ACC)	HARTFIC	FIRIA NIK	D'ER			0.3]-[
2.	FEC IDENTIFICATION N	UMBER ▼	CITY 🛦		STA	ATE A	ZIP CODE A
	C 0,0,3,4,1,3	a 1	3. IS THIS REPORT	NE (N)	OR	AMENDED (A)	
4.	TYPE OF REPORT (Choose One)	(b) Monthly Report	Feb 20 (M2)	Ma	ay 20 (M5)	Aug 20 (M8)	Year Only)
	(a) Quarterly Reports:	Due On:	Mar 20 (M3)	2246 224€3	in 20 (M6)	Sep 20 (M9)	Year Only)
	April 15 Quarterly Report (Q1) (c) 12-Da	Apr 20 (M4)	Ju Primary (12P)	1 20 (M7)	Oct 20 (M10 General (12G)	Jan 31 (YE) Runoff (12A)
	July 15 Quarterly Report (O2) PRE-I	y Election t for the:	Convention (12	2C)	Special (12S)	News 1
	October 15 Quarterly Report (January 31 Year-End Report ("	Election on				in the State of
	July 31 Mid-Year Report (Non-electi Year Only) (MY)	on (d) 30-Da	y -Election to the:	General (30G)	g=41	Runoff (30R)	Special (305)
	Termination Repor (TER)		Election on			Tadasta factoria	in the State of
5.	Covering Period		2006	through	0.9	30 2	0 0 6
	ertify that I have examined to be or Print Name of Treasur		_		elief it is true,	, correct and comp	lete.
Sig	nature of Treasurer	5)8	2/2-		Dat	besides the	02 2006
NO	Office Use	neous, or incomplet	e Information may \$	ubject the pers	on signing this		C FORM 3X Rev. 12/2004
L	Only			<u> </u>			1101. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2 FEC Form 3X (Rev. 02/2003) Write or Type Committee Name Report Covering the Period: From: **COLUMN B COLUMN A** Calendar Year-to-Date This Period (a) Cash on Hand January 1, (b) Cash on Hand at Beginning of Reporting Period..... Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) Total Disbursements (from Line 31)..... Cash on Hand at Close of Reporting Period 6,6,5<u>,</u>a, 6.6.5 al (subtract Line 7 from Line 6(d))..... 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

(I)

of Receipts

Write or Type Committee Name Robinson & Cole Federal Political Action Committee Report Covering the Period: From: **COLUMN A** COLUMN B I. Receipts Calendar Year-to-Date Total This Period 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)..... 000 (ii) Uniternized (iii) TOTAL (add 000 (b) Political Party Committees (c) Other Political Committees (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 000 Totals to Line 33, page 5)▶ Transfers From Affiliated/Other 0.0.0 Party Committees..... 0,0,0 13. All Loans Received 000 000 14. Loan Repayments Received..... Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... $O_{-}O_{-}O$ Refunds of Contributions Made to Federal Candidates and Other Political Committees..... Other Federal Receipts 0,0,0 (Dividends, Interest, etc.)..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)..... (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b))... Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))........▶ 20. Total Federal Receipts (subtract Line 18(c) from Line 19)

of Disbursements

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. Opera (a) A	ting Expenditures: llocated Federal/Non-Federal		
	ctivity (from Schedule H4)		
(i) Federal Share		
(i	i) Non-Federal Share	0.0.0	000
(b) C	Other Federal Operating		
	xpenditures	I O O O	
٠,,	otal Operating Expenditures add 21(a)(i), (a)(ii), and (b)}▶	0.00	0.00
	fers to Affiliated/Other Party		Activities of the second secon
	nitteesibutions to	0.0.0	
Feder	al Candidates/Committeesther Political Committees	25000	25,0,00
	endent Expenditures	The state of the s	
(use t	Schedule E)	0.06	
(2 U.S	S.C. §441a(d)) Schedule F)	100 b	000
(086 -	Scriedule 1 J	The state of the s	
26. Loan	Repayments Made	0.00	000
D7 Loon	Mada	0 0 0	000
28. Refur	s Made		A STANDARD OF THE PROPERTY OF
(a) <u>I</u>	ndividuals/Persons Other Than Political Committees	0.00	
(b) F	halistaal Dark Committees	A D O	000
	Political Party Committees Other Political Committees	Harris of the state of the stat	Contract to the second of the
. ,	such as PACs)	000	
(d)	Total Contribution Refunds	**************************************	al Anto the tenth of the tenth
	add Lines 28(a), (b), and (c))	0.00	
29. Other	r Disbursements	000	$Q \circ Q$
za. Olitei			
	ral Election Activity (2 U.S.C. §431(20))		
, ,	Allocated Federal Election Activity (from Schedule H6)	Generalise variation de la constant de la constant	والمستعدر المستعدر والمستعدر المستعدر ا
	(i) Federal Share	0.0.0	
	-		
	(ii) "Levin" Share		
(b)	With Federal Funds	0.00	000
(c)	Total Federal Election Activity (add		Λ Λ Λ
•	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	000	The state of the s
31. Total	Disbursements (add Lines 21(c), 22,	Controller and and Controller of the median of the property of the second	A CONTRACTOR OF THE PROPERTY O
23, 2	24, 25, 26, 27, 28(d), 29 and 30(c))	a.5.0.0.0	1
32. Total	Federal Disbursements		
-	tract Line 21(a)(ii) and Line 30(a)(ii)		
from	Line 31)	45000	

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DETAILED SUMMARY PAGE

of Disbursements

Page 5 FEC Form 3X (Rev. 02/2003) COLUMN A **COLUMN B** III. Net Contributions/Operating Ex-Calendar Year-to-Date **Total This Period** penditures 33. Total Contributions (other than loans) (from Line 11(d), page 3) 34. Total Contribution Refunds (from Line 28(d)) 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶ 37. Offsets to Operating Expenditures (from Line 15, page 3)..... 38. Net Operating Expenditures

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SCHEDULE	A	(FEC	Form	3X)
ITEMIZED F	REC	EIPTS	•	

SCHEDULE A (FEC FOR	n 3A)	Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b 11c 12 13 14 15 16 17
Any information copied from such Rep or for commercial purposes, other than	orts and Statements ma using the name and a	ay not be sold or used by any puddress of any political committe	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
		eral Political	Action Committee
Full Name (Last, First, Middle Initia)		Date of Receipt
A Mailing Address			FARTHER & FREEZON & BACKERSON AND AND ASSESSMENT OF THE PERSON AS
			
City .	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.			
Name of Employer	Occupation	1	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General	,		~ }
Other (specify) ▼			<u></u>
Full Name (Last, First, Middle Initia B.	J)		Date of Receipt
Mailing Address	<u>-</u>		
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		
Name of Employer	Occupation	n	
Receipt For:	Agoreoate	Year-to-Date ▼	
Primary General	_+ _	the state of the s	-1 }
Other (specify)	the second secon	<u> </u>	<u></u>
Full Name (Last, First, Middle Initia	al)		Date of Receipt
Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing	St	markensumanna and markensum	Autorit of Pact Mescile and Autor
federal political committee.	C		<u> </u>
Name of Employer	Occupation	ก่	
Receipt For: Primary General]	e Year-to-Date ▼	
Primary ☐ General Other (specify) ▼			
SUBTOTAL of Receipts This Page	(optional)	445-5-1	0.00
TOTAL This Period (last page this I	 		

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SCHEDULE B	(FEC	Form	3X)
ITEMIZED DISE	BURSE	MENT	S

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ITE	MIZED DISBURSEMENTS	for each category of the	(check only	one) □ 22 23 24 25 26			
		Detailed Summary Page	H ₂₇	H _{28a} H _{28b} H _{28c} H ₂₉ H _{30b}			
	- internal in the same and Choten	name may not be sold or us	<u></u>	<u> </u>			
Any or	Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.						
ķ	NAME OF COMMITTEE (In Full)						
	Robinson + Cole Fed	Local Oslika	1 1-4	in Committee			
L	<u> </u>	Serwi POICHE	A FET	184 COMINTINEE			
_	Full Name (Last, First, Middle Initial)		}	. Date of Disbursement			
A.	Courtney, Joseph D.						
	Mailing Address	 		09 19 2006			
	P.O. BOX 1372						
	City	State Zip Code	1				
	46111611	T 06066					
	Political Contribution			Amount of Each Disbursement this Period			
	Candidate Name		Category/				
	Joseph D. Courtney		Турв	25000			
	Office Sought: House Disburser	ment For:					
	Senate	Primary General	ŀ				
	State: CT District: 2000 0	Other (specify)	ļ				
_	Full Name (Last, First, Middle Initial)						
8.	Fun Name (Last, First, Widole whole)			Date of Disbursement			
	Mailing Address						
		State Zie Code		<u> </u>			
	City	State Zip Code					
	Purpose of Disbursement		-				
				Amount of Each Disbursement this Period			
	Candidate Name		Category/				
-	Office Sought: House Disburse	ment For:	Туре	hadred to the first of the firs			
	Office Sought: House Disburse Senate	Primary General					
	President	Other (specify) ▼					
	State: District:	·					
	Full Name (Last, First, Middle Initial)		•				
C.				Date of Disbursement			
	Mailing Address						
	Mailing Address						
	City	State Zip Code					
	Burnan of Dishuranment			4			
	Purpose of Disbursement		Andrew Santage	Amount of Each Disbursement this Period			
	Candidate Name		Category/	Same and the second sec			
			Type				
		ement For:					
	Senate	Primary General					
	State: District:	Other (specify)		1			
Г	CIGIO.	_ 		Townshormstrandardischer Strandard S			
	SUBTOTAL of Disbursements This Page (optional)			25000			
-				260 20			
· }	TOTAL This Period (last page this line number only	y)		250.00			

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HEDULE C (FEC Form 3X)			PAGE 8 OF 2
ANS .		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE 13 OF FORM 3X
NE OF COMMITTEE (In Full)			<u> </u>
DE OF COMMITTEE (III COII)			
TALL SALIDAS FAILNAMA (Lost First	Middle Initial	 	ection:
LOAN SOURCE Full Name (Last, First, I	Middle II III dai)	1-	Primary
			General
Mailing Address			Other (specify)
City	State ZIP C		
Original Amount of Loan	Cumulative Payment 1		Outstanding at Close of This Per
the state of the s			
			1. Declared of the lands of the second
TERMS Date Incurred	Date Du	e Interest Rate	Secured:
LASA VERBIVES		Andread Control Control Control	· *
			% (apr) Yes
List All Endorsers or Guarantors (if any	r) to Loan Source		
1. Full Name (Last, First, Middle Initial)	<u>, </u>	Name of Employer	
_			
Mailing Address		Occupation	
			and the state of t
City State	ZIP Code	Guaranteed	
City Cities		Outstanding:	
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
Manual State And			
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City State	ZIP Code	Guaranteed Guara	Landing of the second of the second
3. Full Name (Last, First, Middle Initial)		Name of Employer	
5. Pull Pattle (Last, Flist, Michael Ritter)		Trains or Dispreyer	
Mailing Address		Occupation	
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City State	ZIF Code		Design of the second
4. Full Name (Last, First, Middle Initial)		Name of Employer	<u> </u>
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Malling Address		Occupation	
		America	
City State	ZIP Code	Guaranteed	terrordite section and the section of the section o
Only Online	2, 4545	Outstanding:	Bankan de aller de la company de la comp
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OTALS This Period (last page in this line	only)		

SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for information found on Page 9 of Schedule

ederal Election Commission, Washington, D.C. 204		Page 9 of Schedule C			
NAME OF COMMITTEE (In Full)	-	FEC IDENTIFICATION NUMBER			
Robinson + Cole Federal Po	litical Action Committee	in the state of th			
LENDING INSTITUTION (LENDER)	Amount of Loan	Interest Rate (APR)			
Full Name		<u></u> %			
Mailing Address	Date Incurred or Established				
City State Zip Coo	e Date Due				
A. Has loan been restructured? No	res If yes, date originally incurred				
B. If line of credit,	Total				
Amount of this Draw:	Outstanding Balance:				
C. Are other parties secondarity liable for the	lebt incurred? rantors must be reported on Schedule C.)				
D. Are any of the following piedged as collate property, goods, negotiable instruments, cerstocks, accounts receivable, cash on depos No Yes If yes, specify:	tificates of deposit, chattel papers, it, or other similar traditional collateral?	What is the value of this collateral? Does the lender have a perfected security interest in it? No Yes			
E. Are any luture contributions or future receipt collateral for the loan? No Yes	If yes, specify:	What is the estimated value?			
A depository account must be established to 11 CFR 100.82(e)(2) and 100.142(e)(2).					
Date account established:	Address.	Address:			
	City, State, Zip:				
F. If neither of the types of collateral described the foan amount, state the basis upon which	l above was pledged for this loan, or if the a h this loan was made and the basis on whic	mount pledged does not equal or exceed the characteristics of the contract of			
G. COMMITTEE TREASURER	······································	DATE			
Typed Name Signature	<u> </u>				
H. Attach a signed copy of the loan agreement	nt.				
TO BE SIGNED BY THE LENDING INST To the best of this institution's knowledge are accurate as stated above. The loan was made on terms and or similar extensions of credit to other but the institution is aware of the requirement.		rorable at the time than those imposed for which assures repayment, and has			
AUTHORIZED REPRESENTATIVE	THE DE ST OFFI TOU.U. DIG TOU. 1-12 WE HIGHE	DATE			
Typed Name Signature	Title				
Cignator	[Locational Resolutions			

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SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excludin

(Use separate schedule(s) for each

PAGE O OF FOR LINE NUMBER: (check only one)

iluding Loans		numbered line)	1 10
ME OF COMMITTEE (In Full)			
Pobinson + Cole Federal F	Political Action Con	nmittee	
A. Full Name (Last, First, Middle Initial) of Debto	r or Creditor	Nature of Debt (Purpose	e):
		ţ	
Mailing Address			
City State	Zip Code		
·			
Outstanding Balance Beginning This Period			
Secretary of the second secretary of the second sec			
Amount Incurred This Period	Payment This Period	Outstanding Balance	at Close of This Perk
रिकारीका प्रतिकादिक प्रतिकादिक क्षेत्रक क्षेत्रक क्षेत्रक क्षेत्रक क्षेत्रक क्षेत्रक क्षेत्रक क्षेत्रक क्षेत्र भारताच्या । । । । । । । । । । । । । । । । । । ।	LEAGUE THIS COLOR	*	The state of the s
	Barris paris p	Allert Brancher Brancher	out The estimated and the Property of the Prop
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of Debt (Purpos	xe):
D. TOR FEELING (EASI, FROM HINGE) OF DOOR			•
Mailing Address			
City State	Zip Code		
Oily Oilaid			
Amount Incurred This Period	Payment This Period	त् व त्र	at Close of This Per
C. Full Name (Last, First, Middle Initial) of Debt	or or Creditor	Nature of Debt (Purpos	se):
Mailing Address			
	State 7in Code		
City	State Zip Code		
Outstanding Balance Beginning This Period			
Consistent Datate Definition 1112 Lends			
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Amount Incurred This Period	Payment This Period		at Close of This Per
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TOTALS This Period (last page this line number	r only)	>	
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) TOTAL OUTSTANDING LOANS from Schedule	C (last page only)		Anna de Characteria de Caracteria de Characteria de
	. Una of Commence Dana Continue		F . E . E
) ADD 2) and 3) and carry forward to appropriat	e line of Summary Page (last page	s othy) P	

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES	PAGE / OF 3/ FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) Robinson + Cole Federal Political Action Comm	FEC IDENTIFICATION NUMBER V
Check if 24-hour notice 48-hour notice	
Full Name (Last, First, Middle Initial) of Payee	Date
Mailing Address	Amount
City State Zip Code	A CONTRACTOR OF THE PROPERTY O
Purpose of Expenditure Category/ Type	Office Sought: House State: Senate District: President
Name of Federal Candidate Supported or Opposed by Expenditure:	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Mailing Address	Amount
City State Zip Code	
Purpose of Expenditure Category/ Type	Office Sought: House State: Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of itemized independent Expenditures	
(b) SUBTOTAL of Uniternized Independent Expenditures	Harrison Commence of the confession of the confe
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political
Signature	

SCHEDULE F (FEC Form 3X)

ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE

BEHALF OF CANDIDATES I I.S.C. §441a(d))				General Election)	FOR LINE 25 OF FORM S
E OF COMMITTEE (In Full)					Check if
Robinson + Co	o For	oul B.	itical	Action Co	24-hour notice
your committee been designated to make		I Name of Subo	ordinate Commi	ttee	
dinated expenditures by a political party	1				
YES NO					-
S, name the designating committee:	Ma	iling Address			
				Cto	te ZIP Code
	Cit	у		Sta	te 217 C50e
Full Name (Last, First, Middle Initial) of	Each Payee			Purpose of Expo	Categor
Mailing Address				Date	Туре
City	State	Zip Code			Barla , thank a factor of
Name of Federal Candidate Supported	Office Courabilities	House	1 State:	- Horard In	conference formation for the state of
Hame of Federal Candidate Copported	Office Sought: {	House Senate	District:	Amount	erectiveraliscumityonspanikensellensellen
	<u> </u>	Presidential		' ' ' '	
Appropriate Connect Classics		-			and the section of the section of the section of
Aggregate General Election Expenditure for this Candidate	<u>องใหลงการสือการส มีโดกเลส์การเกล่</u>				ised Due to Opponent's Sp .S.C. §441a(i)/441a-1)
Full Name (Last, First, Middle Initial) of	Éach Payee			Purpose of Exp	enditure programme
Mailing Address					Categor
Maining Addition				Date	
City	State	Zip Code			
Name of Federal Candidate Supported	Office Sought:	House	State:	Amount	<u> </u>
		Senate	District:	—	part Samo officeroes same than a change of party
	<u> </u>	Presidentia		- Inneritant Saure	and and the second second second
Aggregate General Election			ĺ		ised Due to Opponent's Sp i.S.C. §441a(i)/441a-1)
Full Name (Last, First, Middle Initial) of	Each Payee			Purpose of Exp	penditure anapung
					Catego
Mailing Address				Date	Type
City	State	Zip Code			
Name of Federal Candidate Supported	Office Sought:	House	State:	Amount	· · ·
	1	Senate	District:	Brantisuradanad	and the same of t
·		Presidentia			handere bestätte der Anne Steel
Aggregate General Election	and the second				aised Due to Opponent's Sp J.S.C. §441a(i)/441a-1)
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JBTOTAL of Expenditures This Page (or	puorial)	•••••			Recommendation of the second
				- facilizade	house the same of

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)				
Robinson + Cole Federal Political Action Committee				
USE ONLY ONE SECTION, A or B				
A. State and Local Party Committees				
Fixed Percentage (select one)				
Presidential-Only Election Year (28% Federal)				
Presidential and Senate Election Year (36% Federal)				
Senate-Only Election Year (21% Federal)				
Non-Presidential and Non-Senate Election Year (15% Federal)				
B. Separate Segregated Funds and Nonconnected Committees				
Flat Minimum Federal Percentage				
If the committee will allocate using the flat minimum percentage of 50% federal funds, check				
If the committee is spending more than 50% federal funds, indicate ratio below				
Federal%				
Nonfederal%				
This ratio applies to (check all that apply):				
Administrative Generic Voter Drive Public Communications Referencing Party Only				

SCHEDULE H2 (FEC Form 3X) ALLOCATION RATIOS

PAGE	14	of Ji
1	1.1	

mmittee			
Robinson + Cole Federal Political Action Committee ACTIVITIES APPEARING ON THIS REPORT.			
od" where the federal pro	portion of		
ding to benefit expected a derived by federal candidunications or voter drives aference to a political part	dates from the ac- that refer to both		
FEDERAL %	NONFEDERAL %		
%	%		
FEDERAL %	NONFEDERAL %		
%	%		
FEDERAL %	NONFEDERAL %		
%	%		
FEDERAL %	NONFEDERAL %		
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SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)				
Robinson + Cole Federal Political Action Committee				
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED		
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c) Total Amount Transferred For Direct Fur	ndraising	#		
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SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	16	OF	21	
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	KODINSON + COLE PEREVOLI E	<u>© U 1) (A)</u>	MCDM L	ommille.	Laurena destricte de Europti
A.	Full Name (Last, First, Middle Initial)				Allocated Activity or Event: Administrative Fundraising Exempt
	Mailing Address			1	Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	Day of Dishara and				Allocated Activity or Event Year-To-Date
	Purpose of Disbursement:				The state of the s
	Activity or Event Identifier:		•	Category/ Type	Date Contract of the second se
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
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8.	Full Name (Last, First, Middle Initial)				Allocated Activity or Event: Administrative Fundraising Exempt
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	City	State	Zlp Code	<u> </u>	Public Comm (ref to party only) by PAC
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SCHEDULE H5 (FEC Form 3X)

TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

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·	TOTAL This Period (Total Amount of Train	nsfers Received)	D.O.O.

SCHEDULE H6 (FEC Form 3X) DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

PAGE	18	OF	الم	
FOR LI	NE 30a	ÖF	FORM	3X

AME OF COMMITTEE (In Full)			
Robinson + Cole Federal Political Action Committee			
A. Full Name (Last, First, Middle Initial) / Full Organization Name	Type of Allocated Activity or Event:		
	Voter Registration GOTV Voter ID Generic Campaign		
Mailing Address	Allocated Activity or Event Year-To-Date		
City State Zip Code georgisszelg state	Same Brown Bear Brown Bear Black and the second and		
Purpose of Disbursement Category/	Date Date		
FEDERAL SHARE + LEVIN SHARE			
And the state of t			
B. Full Name (Last, First, Middle Initial) / Full Organization Name	Type of Allocated Activity or Event:		
	Voter Registration GOTV Voter ID Generic Campaign		
Mailing Address	Allocated Activity or Event Year-To-Date		
City State Zip Code	The same of the sa		
Purpose of Disbursement Category/	Date		
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C. Full Name (Last, First, Middle Initial) / Full Organization Name	Type of Allocated Activity or Event:		
	Voter Registration GOTV Voter ID Generic Campaign		
Mailing Address	Allocated Activity or Event Year-To-Date		
City State Zip Code	The second secon		
Purpose of Disbursement Category/	Date		
FEDERAL SHARE + LEVIN SHARE	= TOTAL AMOUNT		
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SUBTOTAL of Shared Federal and Levin Activity This Page			
FEDERAL SHARE + LEVIN SHARE	= TOTAL AMOUNT		
Comment of the Commen	f		
FOTAL This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))			
FEDERAL SHARE ###################################			
LEVIN SHARE	000		
FOTAL This Period for the Levin Share	7		

SCHEDULE L (FEC Form 3X)

AGGREGATION PAGE: LEVIN FUNDS

NAME	NAME OF COMMITTEE (In Full) Robinson + Cole Federal Political Action Committee					
NAME	NAME OF ACCOUNT					
	<u> </u>	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE			
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3.	TOTAL RECEIPTS	k San Brandon of Charles and Charles Brandon a				
4.	TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)					
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	(b) Voter ID					
	(c) GOTV	A series of the	Sensehverderreikanskimmeriken shinalistarih sandaradan disperal Persekundurungan mengentukan disperalan dispe			
	(d) Generic Campaign (e) Total		The state of the s			
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7.	BEGINNING CASH ON HAND					
8.	RECEIPTS(from Une 3)	Same gas and some growing process growing and garage an				
9.	SUBTOTAL(Add Lines 7 and 8)	· () · ()	en en ingeneral general general de la company de la compan			
10.	DISBURSEMENTS(From Line 6)		A CONTRACTOR OF THE PERSON OF			
11.	ENDING CASH ON HAND(Subtract Line 10 From Line 9)					

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SCHEDULE L-A (FEC Form 3X)

Use separate schedule(s)

TEMIZED RECEIPTS OF LEVIN FUNDS		each category of the gregation Page	FOR LINE NUMBER: 1a 2
Any Information copied from such Reports and Statements more for commercial purposes, other than using the name and a	ay not be so address of a	old or used by any personny political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Robinson + Colo Federal P		al Action C	
Full Name (Last, First, Middle Initial) / Full Organization Na A.	ame		Date of Receipt
Mailing Address			Amount of Each Receipt this Period
City	State	Zip Code	The second secon
Name of Employer or Principal Place of Business		-	இ <u>களிகளிகளிகளிகளிகளிகளிகளி</u> Aggregate Year-to-Date நகைருகளுகளுக்குகளுக்குகளுக்குகள்
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City	State	Zip Code	ti i in no some and in transfer and in the second properties and in the second properties associate associate and in
Name of Employer or Principal Place of Business			Aggregate Year-to-Date
Occupation	<u>-</u>		
Full Name (Last, First, Middle Initial) / Full Organization NC.	lame		Date of Receipt
Mailing Address	_		Amount of Each Receipt this Period
City	State	Zip Code	
Name of Employer or Principal Place of Business			Aggregate Year-to-Date
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Mailing Address			Amount of Each Receipt this Period
City	State	Zip Code	the state of the s
Name of Employer or Principal Place of Business			Aggregate Year-to-Date
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SUBTOTAL of Receipts This Page (optional)	,	>	
TOTAL This Period (last page this fine number only)			000

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SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

Use separate schedule(s) for each category of the Aggregation Page

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FOR LINE NUMB (check only one)		. 1	╗.	
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F LEVIN FUNDS	Aggregation Fage	4b4d
ny information copied from such Reports and Statements may for commercial purposes, other than using the name and add	son for the purpose of soliciting contributions o sollcit contributions from such committee.	
NAME OF COMMITTEE (In Full) Robinson + Cole Federal P		
Full Name (Last, First, Middle Initial) / Full Organization Name	Date of Disbursement.	
Mailing Address		
City	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement	<u> </u>	
Full Name (Last, First, Middle Initial) / Full Organization Nam	18	Date of Disbursement
Mailing Address		
City State	Zip Cade	Amount of Each Disbursement this Period
Purpose of Disbursement		
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Mailing Address		
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement	·	
SUBTOTAL of Disbursements This Page (optional)	>	
TOTAL This Period (last page this line number only)		0.00

Federal Election Commis ENVELOPE REPLACEMENT PAGE FOR IN The FEC added this page to the end of this filing to	COMING DOCUMENTS
	Date of Receipt
Hand Delivered	
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
	Postmarked
USPS Priority Mail Delivery Confirmation™ or Signatu	re Confirmation™ Label
	Postmarked
USPS Express Mail	
Postmark Illegible	-
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Nex	t Business Day Delivery
Received from House Records & Registration Of	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
SZ-	10/3/06
PREPARER	DATE PREPARED
(3/2005)	